

D 3 2 6 2 - 0 4 3

Work Order ID 107992

October-07-13 9:05:59 AM

B 1 0 7 9 9 2

107992

Page 1

Item ID: D3262-043

R E V E

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Canister Assembly

Stop

NS2

Start Date: 10/07/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 10/07/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: ML5

Date: 13-10-08 Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3262	E								
100	Weld per dwg A/R Aluminum rod Batch: M271165	0.00							
100	Large Fab								
Large Fab	Memo	0.00							
Large Fab	Weld canister assembly as per Dwg D3262 using DT8739 to align fittings								
110	QC9- Inspect visual per QSI004- Fusion Welds	0.00							
110	QC								
Quality Control	Memo	0.00							
120	QC5- Inspect part completeness to step on W/O	0.00							
120	QC								
Quality Control	Memo	0.00							
	Pressure test as per Dwg D3262								

① 13-10-24 PD

DAS
18
98

1 0 13-10-28

DAS
18
98

1 0 13-10-28

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____		DISPOSITION		AGAINST DEPARTMENT/PROCESS						
Part No. _____		Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>		Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
NCR No. _____		Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>		Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
		Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>		Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
		Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>		Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear	General									
	Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>						
	Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>						
	Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>						
	Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>						
	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>						
	Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Part Moved <input type="checkbox"/>						
	Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>						
	Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>						
	Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>	<input type="checkbox"/>						
	Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>	<input type="checkbox"/>						
	Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>	<input type="checkbox"/>						
				<input type="checkbox"/>						
				<input type="checkbox"/>						
				<input type="checkbox"/>						

Work Order ID 107992***107992***

Page 2

October-07-13 9:05:59 AM

Item ID: D3262-043**Accept*****N900040100*****Setup****Start*****NS1*****Revision ID:****Stop*****NS2*****Item Name:** Canister Assembly**Start Date:** 10/07/13 **Start Qty:** 1.00***1*****Cust Item ID:****Required Date:** 10/07/13 **Req'd Qty:** 1.00***1*****Customer:****Reference:****Approvals:** **Process Plan:****Date:****Tooling:****Date:****Run****Start*****NR1*****QC:****Date:****SPC (Y/N):****Date:****Stop*****NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 *130* HandFinish	Chemical Conversion Coat per QSI005 4.1	0.00					1	78131029	
Hand Finishing	Memo	0.00							
140 *140* Powdercoat	White Gloss(Ref:4.3.5.1) per QSI005 4.3-Alum	0.00					1	13-10-30.	DAS 34 9-89
Powder Coating	Memo ****Ensure to mask threads. **** START TIME: <u>10:00</u> OVEN TEMPERATURE: <u>320</u> FINISH TIME: <u>11:50</u>	0.00							
150 *150* QC	QC3- Inspect Part Finish	0.00	DAS 16 9-89	1310130			40		
Quality Control	Memo	0.00							

NCR: Yes / No

DQA: Date:

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS						
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>					
Part No. _____			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>					
NCR No. _____			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>					
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector
Doc/Data												
Equip/Tooling												
Operator												
Material												
Setup												
Other												
Process												
Supplier												
Training												
Unapproved												
FAULT CATEGORY												
Landing Gear				General								
				Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>				
Centre Not Concentric to O/S <input type="checkbox"/>				BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>					
Cracks <input type="checkbox"/>				Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>					
Crushed/Crimped. <input type="checkbox"/>				Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>					
Cuffs <input type="checkbox"/>				Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>						
Heat Treat <input type="checkbox"/>				Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>						
Inspection Strip in Tube <input type="checkbox"/>				Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>						
Ripples in Bend <input type="checkbox"/>				Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>							
Torque Waves in Extrusion <input type="checkbox"/>				Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>							
Turning Sequence <input type="checkbox"/>				Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>							
Wave/Twist in Tube <input type="checkbox"/>				Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>							

Work Order ID 107992***107992***

Page 3

October-07-13 9:05:59 AM

Item ID: D3262-043

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Canister Assembly

Stop

NS2

Start Date: 10/07/13 Start Qty: 1.00

1

Cust Item ID:

Required Date: 10/07/13 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan:

Date: Tooling:

Date: Run

NR1

QC: Date: SPC (Y/N):

Date: Start

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
160 *160* Packaging	Identify as per dwg & Stock Location: <u>JT485</u>	0.00				<u>1X</u>	<u>28</u>	<u>9-89</u>	<u>13-10-30</u>

Packaging

170

QC21- Final Inspection - Work Order Release

0.00

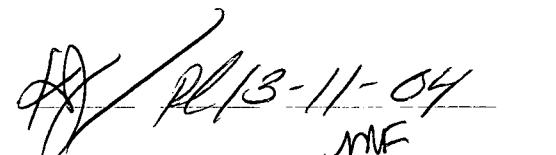
170

QC

Quality Control

Memo

0.00





 13-10-30

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
Part No. _____	Work Order Update	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	
NCR No. _____		Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>	
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear				General						
				Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>		
Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>						
Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>						
Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>						
Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>							
Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>							
Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other <input type="checkbox"/>						
Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>								
Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>								
Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>								
Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>								

Picklist Print

October-07-13 9:05:59 AM

Page 1

Work Order ID: 107992

Parent Item: D3262-043

Start Date: 10/07/13

Required Date: 10/07/13

Parent Item Name: Canister Assembly

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP rev A 10.01.19 new issue EC verified by: DD
10.05.10 verified :EC IPP Rev:B as per ECN10-571 DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3262-1 Tube		Manufactured	No			100	Each	0.0000	1	1		B105362 -> ① 13.10.21	PD
D3262-5 Cap		Manufactured	No			100	Each	11.0000	2	2		② 13.10.21	PD
<u>Location</u> <u>Loc Qty</u> <u>Loc Code</u>													
	LG002					1							
	74724					1							
	WA003					10							
	106038					6							
	95353					4							2

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

ITEM	QTY -041	P/N	DESCRIPTION
	X	D3262-041	CANISTER ASSEMBLY
1	1	D3262-1	TUBE
2	2	D3262-3	CAP

D

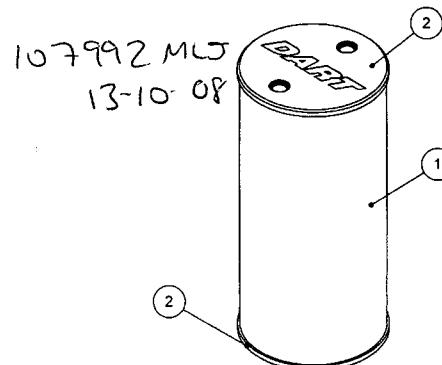
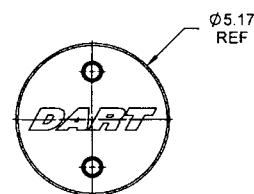
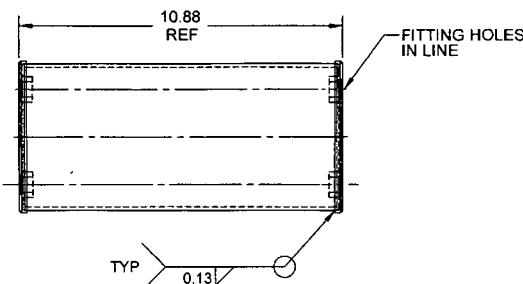
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C

C

B

B



D3262-041 CANISTER ASSEMBLY

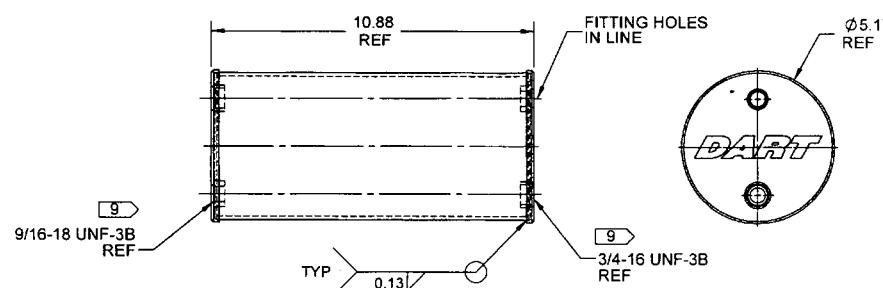
RELEASED
2010-05-07
NM

NOTES:

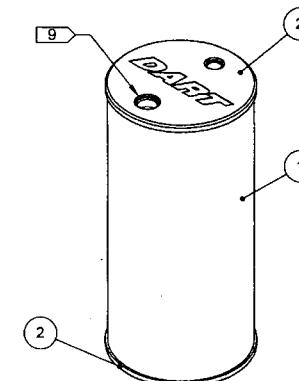
- 1) MATERIAL: N/A
- 2) FINISH: CHEMICAL CONVERSION COAT PER QSI 005 4.1
POWDER COAT ASSEMBLY WHITE (4.3.5.1) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3262-041" AND B/N USING FINE POINT PERMANENT INK MARKER
- 7) WEIGHT: 2.51 lbs
- 8) LIQUID PENETRANT INSPECT PER ASTM E1417 LEVEL 1 OR
PRESSURIZE TO 10 psi AND SUBMERGE UNDER WATER TO CHECK FOR LEAKS

E	0.25 WAS 0.45 (ZN C7-4, C7-5); 0.13 WAS 0.33 (ZN B7-4, B7-5); ADD DIMENSION (ZN B1-4, D1-5, B1-5)	RF	10.05.03
D	ADD D3262-043-5 (ZN B5-2, B5-5); REVISE DIMENSIONS TO EQUAL TOOL DIMENSIONS (ZN B2-4, C2-4) PER CAR 09-004	RF	09.12.30
C	Ø5.165 WAS Ø5.190	RF	06.08.31
B	ADD PRESSURE TESTING OPTION	MB	05.02.14
A	NEW ISSUE	RF	04.05.06
REV.	DESCRIPTION	BY	DATE
DESIGN	RF	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>z</i>	DRAWING NO.	REV. E
MFG. APPR.	<i>z</i>	D3262	SHEET 1 OF 5
APPROVED	<i>z</i>	TITLE	SCALE
DE APPR.	<i>z</i>	FUEL PURGE CANISTER	NTS
DATE	10.05.03	COPYRIGHT © 2004 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR CONSIDERED AS DISCLOSED UNLESS AUTHORIZED BY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

ITEM	QTY	P/N	DESCRIPTION
	X	D3262-043	CANISTER ASSEMBLY
1	1	D3262-1	TUBE
2	2	D3262-5	CAP



D3262-043 CANISTER ASSEMBLY



RELEASED
2010-05-07
AN

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: CHEMICAL CONVERSION COAT PER QSI 005 4.1
POWDER COAT ASSEMBLY WHITE (4.3.5.1) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3262-043" AND B/N USING FINE POINT PERMANENT INK MARKER
- 7) WEIGHT: 2.50 lbs
- 8) LIQUID PENETRANT INSPECT PER ASTM E1417 LEVEL 1 OR
PRESSURIZE TO 10 psi AND SUBMERGE UNDER WATER TO CHECK FOR LEAKS
- 9) WELD CAPS WITH 3/4-16 TAP TOP HOLE IN LINE WITH 9/16-18 TAP BOTTOM HOLE

DESIGN	RF	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>BB</i>	DRAWING NO.	
MFG. APPR.	<i>BB</i>	REV. E	
APPROVED	<i>BB</i>	D3262	
DE APPR.	<i>BB</i>	SHEET 2 OF 5	
DATE	10.05.03	TITLE	
		SCALE	
		NTS	

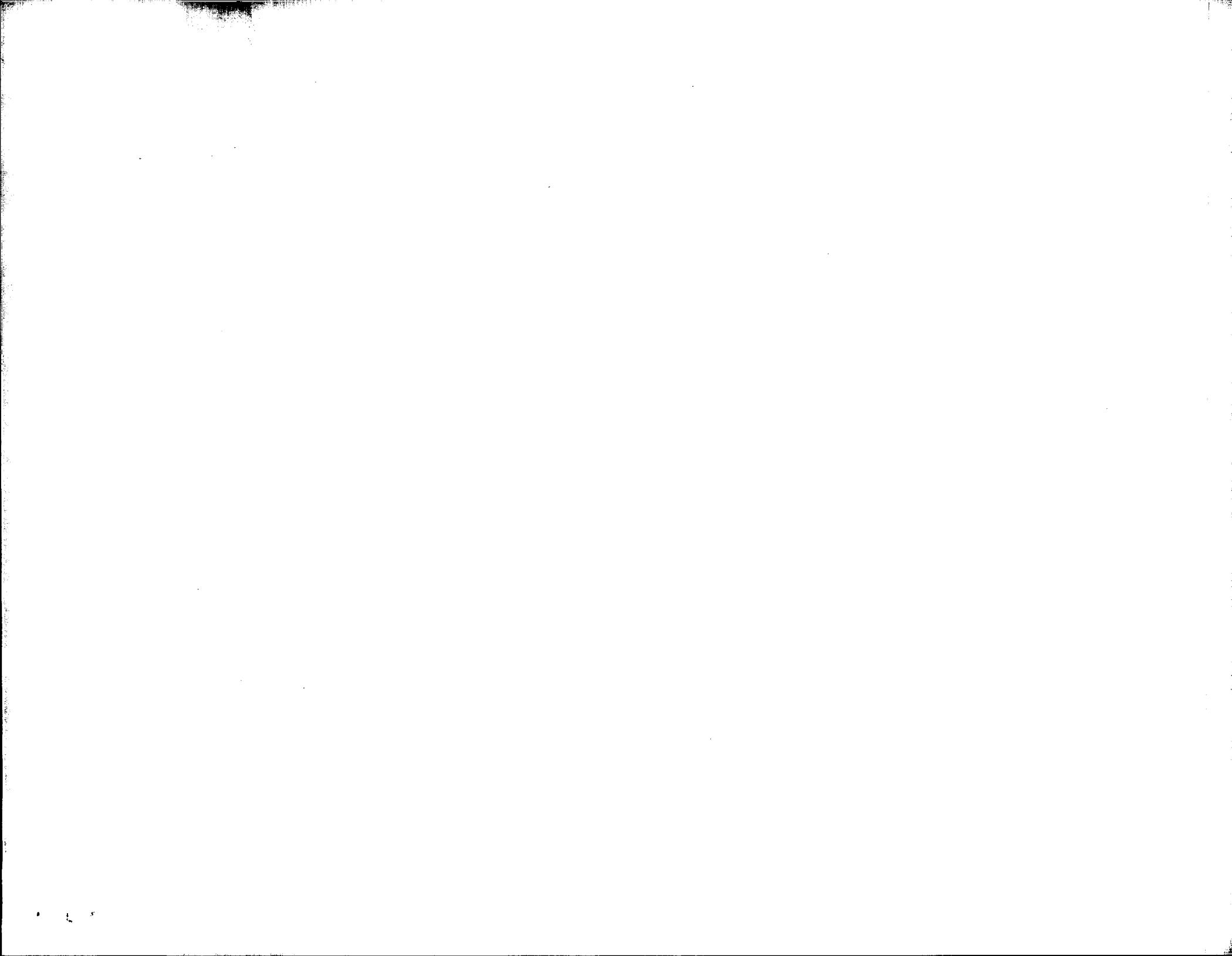
FUEL PURGE CANISTER

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D

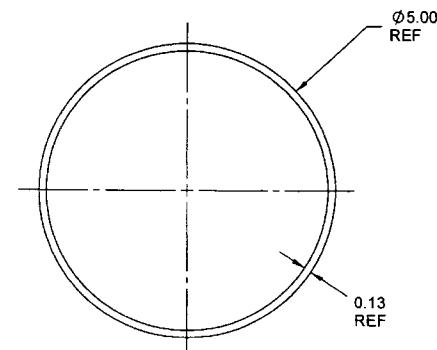
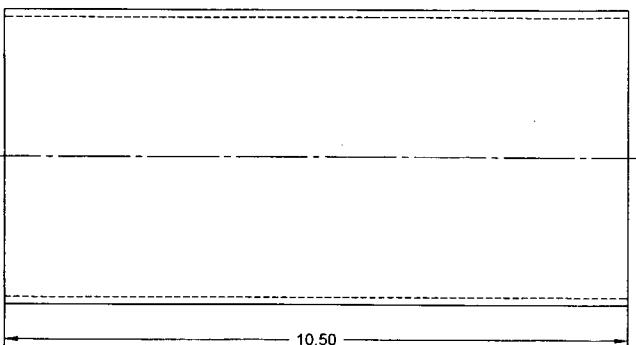
D

C

C

B

B



D3262-1 TUBE

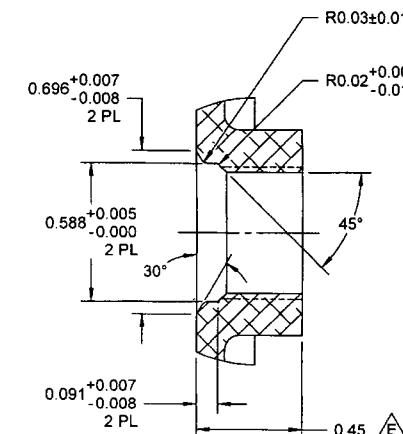
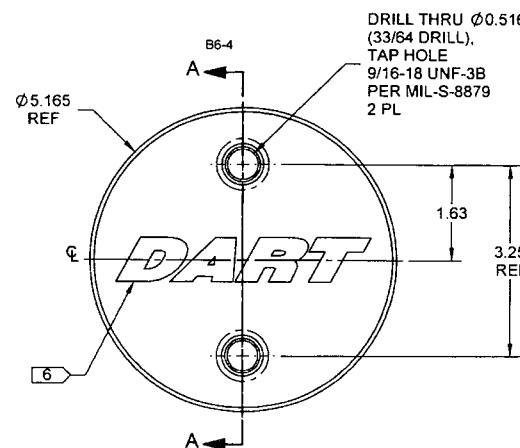
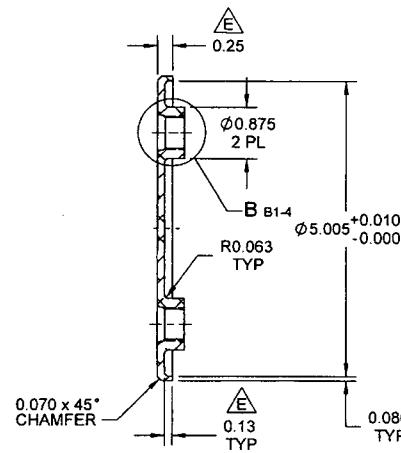
RELEASED
2010-05-07
AM

NOTES:

- 1) MATERIAL: 6061-T6 OR 6061-T62 ALUMINUM TUBING, 5.00 OD x 0.125 WALL
PER WV-T-700/6 OR AMS 4080 OR AMS 4082 OR QQ-A-200/8 OR QQ-A-225/8
REF. DART SPEC. M6061T6T5.000W.125
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 1.96 lbs
- 8) PART IS SYMMETRICAL ABOUT CENTERLINE

DESIGN	RF	DART AEROSPACE LTD
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA
CHECKED		REV. E
MFG. APPR.	AM	DRAWING NO.
APPROVED	AM	D3262
DE APPR.	AM	SHEET 3 OF 5
DATE	10.05.03	TITLE
		SCALE
		FUEL PURGE CANISTER
		NTS

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SECTION A-A C5-4

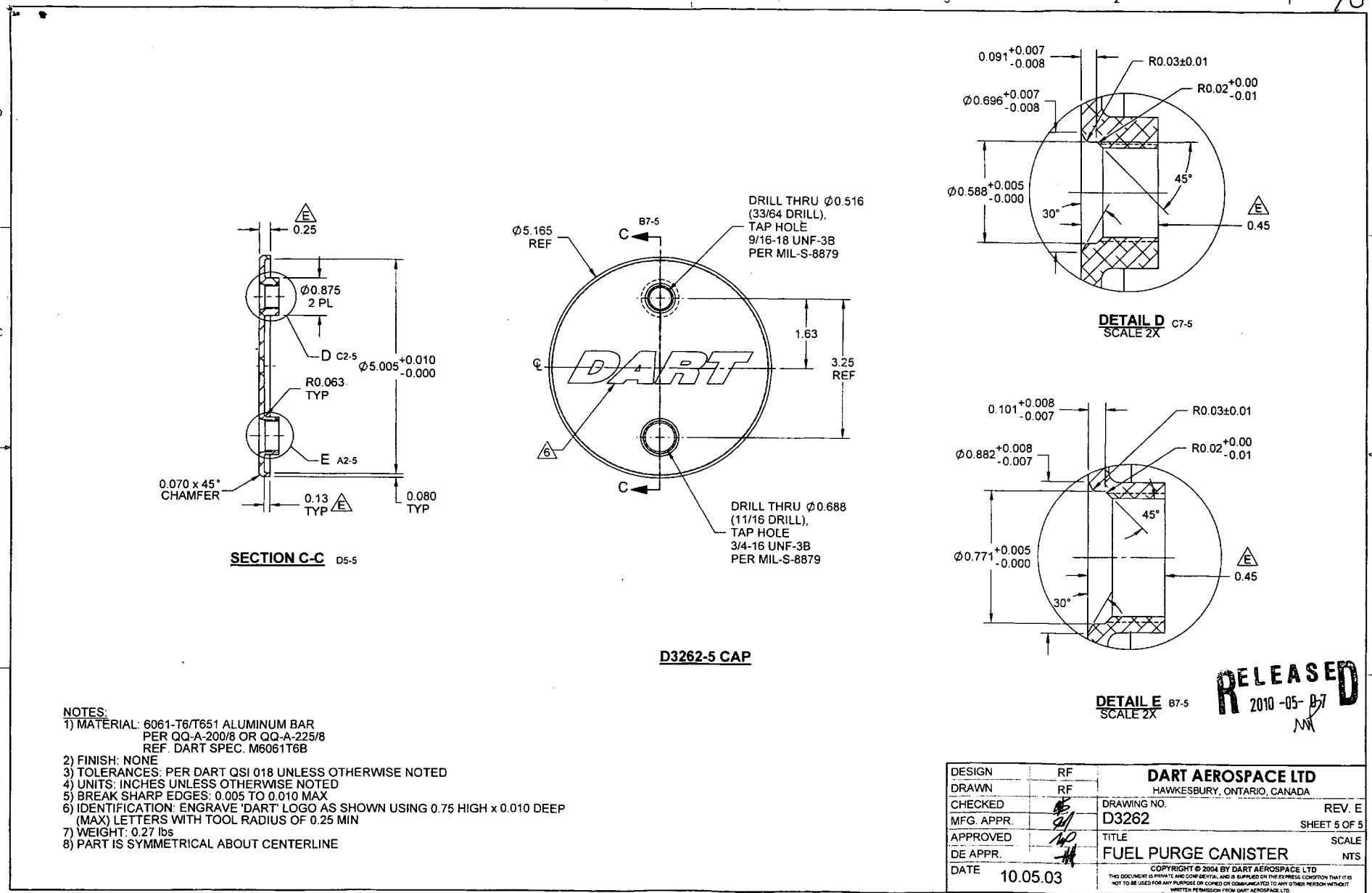
D3262-3 CAP

NOTES:

- 1) MATERIAL: 6061-T6/T651 ALUMINUM BAR
PER QQ-A-200/8 OR QQ-A-225/8
REF. DART SPEC. M6061T6B
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: ENGRAVE 'DART' LOGO AS SHOWN USING 0.75 HIGH x 0.010 DEEP
(MAX) LETTERS WITH TOOL RADIUS OF 0.25 MIN
- 7) WEIGHT: 0.28 lbs
- 8) PART IS SYMMETRICAL ABOUT CENTERLINE

DESIGN	RF	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. E
		D3262	SHEET 4 OF 5
MFG. APPR.			
APPROVED		TITLE	SCALE
DE APPR.		FUEL PURGE CANISTER	NTS
DATE	10.05.03	COPYRIGHT © 2004 BY DART AEROSPACE LTD. THIS DOCUMENT IS THE PROPERTY OF DART AEROSPACE LTD. IT IS TO BE USED FOR THE SPECIFIED PURPOSE ONLY AND IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

RELEASED
2010-05-07
NP



DESIGN	RF	DART AEROSPACE LTD
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA
CHECKED	<i>BB</i>	DRAWING NO.
MFG. APPR.	<i>BB</i>	REV. E
APPROVED	<i>BB</i>	SHEET 5 OF 5
DE APPR.	<i>BB</i>	TITLE
DATE	10.05.03	SCALE
		FUEL PURGE CANISTER
		NTS

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